



***OBH Opioid Response - Grant Funding***  
***September 18, 2018***  
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***Colorado Department of Human Services***



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Department of Human Services



# *Overview of Federal Opioid Grants*

## State Targeted Response (STR)

- Amount: \$7.8 million per year over two years
- Project Period: May 1, 2017- April 30, 2019

## State Opioid Response (SOR)

- Amount: \$14.8 million per year over two years
- Project Period: Sept. 30, 2018-Sept. 29, 2020
- 7 months initial overlap with STR

STR provided a strong foundation. SOR builds on this existing work with some new additions including rural MAT services, prescribing alternatives to opioids (ALTOs) and strengthening the peer recovery workforce.

# Successes from STR, Year 1



**352** completed naloxone reversals



**961** people trained to administer naloxone



**800** new patients getting office-based by STR-trained providers



**103 million** impressions from the Lift the Label campaign



**2** Emergency Departments conducting a pilot for MAT



**70** crisis line staff trained to better serve people with OUD



**51** people inducted on MAT in jail, prior to release

# *Plans for SOR Grant*

Broken out by Opioid Study Committee Buckets:

- Prevention
- Treatment
- Recovery
- Criminal Justice
- Harm Reduction



# *Prevention*

## Continue and Expand

- Family Support Services in Opioid Treatment Program (OTP) Settings
- Community outreach through the consortium

## New

- Family Support Services into courts and county human services
- Improve prescribing practices (alternative to opioids or ALTOs) in more hospitals and departments outside the ED
- Support 2Gen local community planning grants

# *Treatment*

## Continue and Expand

- Tribal support with Southern Ute and Ute Mountain Ute
- MAT trainings for prescribers (IT MATTERS 2), with a focus on rural prescribers
- MAT for uninsured clients
- Residential treatment for high need/homeless clients
- Crisis line services for individuals seeking OUD services
- Lift The Label campaign, incorporating family voices

## New

- Support for urban American Indian population
- Targeted efforts to increase MAT prescribers in rural communities
- Onsite antibiotic care for people who inject drugs while maintaining MAT and linkage to residential treatment\
- Educational curriculum on MAT and stigma for behavioral health and medical providers to support referrals
- Plus....



# *MOBILE HEALTH UNITS!*



New

- 6 Mobile Health Units for rural communities
- Video conferencing and telehealth capacity
- Each unit staffed with 1 nurse, 1 MA level counselor and 1 peer navigator
- Used to induct people on MAT with buprenorphine or monthly injectable naltrexone
- Collaborating with CDPHE, County Public Health agencies and County Human Services to determine routes
- Consideration for rural communities include overdose rate, existing treatment options, OTP locations and community readiness
- Managed by MSOs



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# Recovery

## Continue

- Support 7.5 FTE Peer Navigators
- Train Peers to provide communications, intervention techniques, referrals, direct support and follow-up with OUD clients

## New

- Hire additional 11 FTE peer navigators to work with criminal justice population
- Support peer-run recovery housing to assist OUD clients engaged in MAT
- Strategic plan for integrating recovery into continuum of care and if the state should regulate recovery residences
- Offer MAT friendly recovery coach training with scholarships
- Expand employment services to 3 OTP settings and build support for local private sector/business partnerships



# *Criminal Justice*

## Continue

- Pre-release jail-based OUD services and linkage to MAT in 5 contracted jails

## New

- Add 3 additional jails for pre-release services
- Support for peers linking individuals to MAT services prior to release
- Educational curriculum on MAT and stigma for behavioral health and medical providers to support referrals

# *Harm Reduction*

## Continue

- Distribution of Naloxone kits
- 15,000 kits purchased= \$1,125,000
- 11,416 kits distributed

## New

- 18,000 additional Naloxone kits to be purchased = \$1,350,000
- Connect people to pharmacies to purchase own supply

# *Local Community Funding Opportunity & Free Resources*

- 2 Gen community planning grants
  - Prevention Trainings
- Mobile Health Units/Telehealth
- Rural Physician & Nurse Trainings
  - Expanded MAT Treatment
  - Residential Treatment
  - Crisis Hotline services
- Peer Recovery Coach Training & Scholarships
  - Naloxone Distribution



# *Behavioral Health Facility Licensing Task Force*

Update licensing and standards to:

- Reduce regulatory burdens for providers while maintaining consumer protections and safety standards
- Support a licensing framework that allows for new innovative models of care
- Increase parity and integration of behavioral health
- Support programs that serve individuals with co-occurring (mental health and substance use) and emergency services

# *Building Sustainable Systems*

## OBH's Focus

- Invest in infrastructure
  - Building bridges with local partners
  - Training workforce
  - New access points for treatment
  - New populations of focus
- State Considerations
  - Working with HCPF and SAMHSA to pay for care (HB18-1136)
  - Will need support after federal funds are used to support mobile health/MAT

